

"COURAGE IS THE  
FOUNDATION OF  
INTEGRITY."

- MARK TWAIN

# The Here and Now

A newsletter for Livengrin clinicians

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## New from ASAM

The new American Society of Addiction Medicine Criteria (no longer called Placement criteria) includes a chapter on Persons in Safety Sensitive Occupations (PSSO). This chapter highlights the importance of increased treatment intensity and the benefit of cohort specific settings for individuals such as Police Officers, Healthcare professionals, Airline Pilots, and Attorneys. The new criteria identifies few additional pieces of information that impact both initial placement and continued stay.

1. The size of the population that the PSSO affects and the depth of the effect from impairment.
2. The amount of public trust that is implied in the PSSO's work.

## Would you make a good police officer?

- Shane Moes

Recently in the US and European legal systems, a significant volume of false confession cases have been identified. DNA evidence has exonerated completely innocent individuals that had confessed to investigators to a crime they did not commit. At the core of the problem was the interviewing techniques utilized by the investigators. The false confession scandal in Britain resulted in a national commission and the findings and recommendations provide a cautionary tale for those in pursuit of the truth. The reforms in Britain as well as ongoing academic research is applicable to drug and alcohol counseling where the pursuit for the truth and "getting honest" can be an important treatment goal.

### What we can learn from the British:

1. *Body language is a poor indicator of honesty.*  
Most people are no better than a

coin flip at differentiating a lie from the truth and those that are trained in observing body language are even worse. Investigators are better at identifying fact from fiction when listening to the content. Making a conclusion about the integrity of information based on body language is not a reliable technique.

### 2. *Colombo was a genius!*

Misinformation is most effectively and accurately identified by going over the same or similar ground multiple times from different angles. As we are counseling, being inquisitive and utilizing the "Colombo" technique will not only identify misinformation more accurately but also builds the relationship. Actively trying to understand is a basic rapport building skill when done genuinely.

### 3. *We lead patients without knowing it.*

Interview subjects are motivated to please the interviewer and this undermines the usefulness of any of

the information. Many of the false confessions occur as a result of the suspect learning overtime what to say to please the interviewer so that the process could end. A clue that this process might be happening with a patient could be when they say "what do you want me to say" or more subtly when they start regurgitating what others have said that appeared to make the clinician more satisfied.

Effective investigation as well as counseling requires overcoming the smokescreen of misinformation that can come from overt lying, anxiety, fear, secondary and distorted information, opinion, grandiosity and secondary gains. Neither counseling nor police investigation would be worth anything if these obstacles are not overcome effectively.

Take note of the ways that in your own practice you could be making incorrect evaluations, training patients to please you rather than focusing on themselves and how the Colombo technique might be used more in your pursuit of the truth.

## When working with families remember to ASK:

**Assess the State** of the family and do so with

**Kindness**

- Dana Cohen, Family Department

Livengrin feels very strongly about family involvement, as evidence-based research has found that the success a person's recovery is greatly increased with the presence of a healthy and positive support system. Family involvement is woven throughout the continuum of care and all staff members have opportunities to **ASSESS** the **STATE** of the family and to do so with **KINDNESS**.

For clinicians, it is challenging enough to work with our clients; digging through layers of resistance and denial. Every additional family member brings another layer, obstacle or perhaps barrier; it can begin to feel like a minefield filled with various emotions and defense mechanisms ready to burst.

**Assessing** family dynamics begins with the first phone call to admissions, to observing families in the waiting room and continues in the office with the counselor during a family session. Clinicians are skilled in paying attention to and observing all the

information that families are nonverbally communicating. This information offers clinicians, clues and glimpses into the **State** of the family. We can see what level of experience the family has with this disease.

Is this their first time or tenth time going through this? First timers will often be in shock and scared to death, where as chronic families may be resentful, angry and resistant.

What is the relationship dynamic? Parents are going to experience this differently than a spouse, sibling or close friend.

What emotions are they feeling? Anger, guilt and fear are most common as they ride the emotional roller coaster. As clinicians, it is easy to feel as though we are riding this roller coaster with them, and can become overwhelmed with a variety of our own emotions. Hence, it is suggested to assess the state of the family and to do so with **Kindness**.

Families are not easy to work with. There, I said it. We are seeing them at their worst. Most often their anger is misguided and placed onto staff. Visualize a bullet proof vest when met with angry words or hostile demands. Asking loved ones how they are doing can go a long way; families simply want to be heard. It is easy to see and hear all of the negativity that families may bring so always remember to look for the good in families and believe in their strength and their spirit. They roll up their sleeves or throw up their arms. As clinicians, we can walk along side the family to help them roll up their sleeves by educating them, having compassion for them and motivating them to make their own healthy changes.